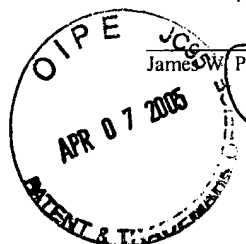


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PATENT

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James W. Paul, Reg. No. 29,967

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the application of

MARK C. CARTER

Serial No. 10/802,221

Filed: March 16, 2004

For: ERECTABLE SHELTER WITH
COLLAPSIBLE CENTRAL ROOF
SUPPORT

Examiner: Winnie S. Yip

Group Art Unit: 3637

Client ID/Matter No. EZUP 68114

Date: April 4, 2005

AMENDMENT

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

This is in reply to the Office Action dated January 6, 2005, setting a shortened
statutory term for a response of three months.

Please enter the following amendments:

APR 07 2005

PTO/SB/21 (04-04)

Approved for use through 07/31/2006. OMB 0651-0031
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)


Application Number	10/802,221
Filing Date	March 16, 2004
First Named Inventor	Mark C. Carter
Art Unit	3637
Examiner Name	Winnie S. Yip
Attorney Docket Number	EZUP 68114

Total Number of Pages in This Submission

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC)
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	Return Postcard
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)	Remarks	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	FULWIDER PATTON LEE & UTECHT, LLP
	Customer No. 24201
Signature	
Date	April 4, 2005

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Typed or printed name	David G. Parkhurst		
Signature		Date	April 4, 2005

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